

Foster Family Home - Corrective Action Report

Provider ID: 1-190023

Home Name: Gretchen Bondoc, RN

Review ID: 1-190023-1

94-322 Haaa Street

Reviewer: David Ayling

Waipahu HI 96797

Begin Date: 5/3/2019

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Home inspection for a new 2 person CCFFH certification made on 5/3/19.

6.(d)(1) - Home is in compliance with all requirements. Home will receive a 2 bed certification.

David Ayling RN
Compliance Manager

Gretchen Bondoc
Primary Care Giver

5/3/19
Date

5/3/19
Date